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| Communication Restorative Nursing Program | | | | NO. | |
| It is the policy of this facility to promote independence and quality of life by maintaining or improving a resident’s ability to use speech language or other functional communication systems.   1. Residents who are unable to communicate independently may be assessed by the nurse and/or therapist for a restorative nursing communication program. Appropriate residents for the program may include the following:      * Coded 1, 2, 3 in hearing (C1) on the MDS * Coded 1, 2, 3 in making self understood (C4) on the MDS * Coded 1, 2, 3 in ability to understand other (C6) on the MDS * Recent decline in communication ability  1. If it is determined the resident would benefit from a nursing restorative communication program, the nurse is to care plan for such a minimum of 6 days per week. 2. The care plan should include measurable goals (maintenance goals are appropriate) and specific interventions. Interventions may include, but are not limited to:  * Staff to reinforce new words learned in therapy * Staff to verbally or visually cue resident * Staff to provide assistive device(s) (e.g. writing slate, picture board, computer, speech synthesizer) * Staff to eliminate loud background noises * Type of assistance (e.g. staff guidance or staff applies hearing aide)  1. Document on the restorative flow sheet or elsewhere as designated, the day and shift spent implementing the restorative nursing communication program in the appropriate columns and spaces. If it is during an assessment “look back” period, record the actual numbers of minutes spent implementing the communication program. 2. Staff are to document resident tolerance / progress towards goals. | | | | | |
| Approved: | Effective Date: | Revision Date: | Change No.: | | Page:  1 of 1 |